

Vasectomy stories and men's role in family planning



Vasectomy has never been a popular family planning method in the Philippines, with most Filipino males mistakenly equating it to a lame “sexual performance” and loss of “manhood.” USAID’s Matching Grants Program (MGP) is helping dispel these notions.



Prominent politicians like Rex Casiano Gerona, mayor of Tabuelan, Cebu who underwent the surgery are coming out publicly about their vasectomy. The testimonies of wives are also instrumental in informing the public about the benefits of vasectomy to couples' intimate relationship.

The “coming out” of Mayor Gerona, Governor Edgar Lara of Cagayan Province and other local government executives who have had surgery is one of the results of the Matching Grants Program. The MGP is being implemented by the Department of Health and local governments units with technical assistance from Management Sciences for Health (MSH), a USAID contractor.

The approach now being used to promote and perform the service is the no-scalpel vasectomy (NSV). Aside from their machismo-based protests, Filipino men complained about the pain involved in the older scalpel vasectomy procedures. NSV, however, requires no incision and therefore, is simpler to perform, less invasive and much less painful.

The 32-year old Mayor Gerona who was already walking around 15 minutes after his vasectomy. His decision was bolstered by his wife, Marifi, who observed the simple procedure done earlier by MSH doctors in Negros Oriental. When they married, they only planned to have three children “*but the slip-up with having used the rhythm method further convinced us about NSV,*” related Marifi, pregnant with their fourth child.

The **Matching Grants Program (MGP)** is intended to improve the capacity of local governments to plan and manage an integrated family planning, maternal and child health and nutrition program.

While NSV has been around for some years already, it has never really taken off. NSV services were first introduced by the program in Bago City, Negros Occidental in January 2002. In a span of three days, 56 sugar cane workers in Bago City voluntarily underwent vasectomies. That unprecedented success encouraged MSH and the DOH to bring the NSV program to other local governments. By March 2003, health units in 87 LGUs performed NSV to almost 2,000 men.

This acceptance and growing demand for NSV are due, in part, to the fact that training and accreditation requirements for physicians are less rigid. Since only local anesthesia is used, there is also a minimal chance of complication or infection. The success of the NSV program can also be attributed to the intensified training of volunteer health workers in the use of a monitoring tool which allows them to identify clients who have expressed the need to limit their family size.

While voluntary surgical contraception has always been one of the most popular methods in the Philippines since its introduction as a program method in 1972, it is still women who bear the majority of family planning responsibilities. Bilateral tubal ligation has accounted for the overwhelming majority of sterilization cases.



“We walked out of the health center after 10 minutes,” said a surprised but satisfied Lolito Merez, a 34-year old pedicab driver. Tenants of a small farm, his earnings as well as his wife’s just could not feed his 7 children and when barangay health workers announced the availability of NSV services, he immediately signed up. NSV can be performed in a health center, clinic or a makeshift operating table with simple surgical tools, unlike tubal ligation which requires an aseptic hospital setting.

Since most partners of men who have had vasectomy are also “coming out,” they attest that not only has their intimate relationship invigorated post-NSV, they love their mates more for sharing the responsibility of planning their families.